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#15/Election  
6-4-03  
2005  
JH

9D-HR-19109  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Masker et al. :  
: Art Unit: 3634  
Serial No.: 09/480,345 :  
: Examiner: Harris, Erica  
Filed: January 10, 2000 :  
:   
For: SPILLPROOF REFRIGERATOR :  
SHELF :

**RESPONSE TO RESTRICTION REQUIREMENT**

Mail Stop Non Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In response to the Office Action dated May 6, 2003, Applicant elects for prosecution in this application all claims that belong to Group II, i.e., Claims 6-20.

Reconsideration of the restriction requirement imposed under 35 U.S.C. §121 is respectfully requested.

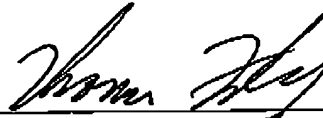
A restriction to either Invention I, consisting of Claims 1 and 3-5 drawn to a method of making assembling a shelf, classified in class 428, subclass 2 or Invention II, consisting of Claims 6-20, drawn to a apparatus/method for rinsing, classified in class 211, subclass 153, was imposed. In response, Applicant elects with traverse to prosecute the invention of Group II, Claims 6-20.

The requirement for election is traversed because the inventions set out by the claims in Groups I and II are clearly related. Applicants submit that a thorough search and examination of

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PATENT

any one Group would be relevant to the examination of the other Group and would not be a burden on the Examiner. Additionally, requirements for election are not mandatory under 35 U.S.C. §121. Accordingly, reconsideration of the election requirement is requested.

Respectfully Submitted,



Thomas M. Fisher  
Registration No. 47,564  
ARMSTRONG TEASDALE LLP  
One Metropolitan Square, Suite 2600  
St. Louis, Missouri 63102-2740  
(314) 621-5070

**ARMSTRONG TEASDALE LLP**

One Metropolitan Square, Suite 2600

St. Louis, Missouri 63102-2740

Phone: (314) 621-5070

Fax: (314) 621-5065

www.armstrongteasdale.com

Date: June 2, 2003

**Please Deliver To:****Name: Examiner Erica Harris****Firm: U.S. Patent and Trademark Office****Tel: (703) 306-9071****Fax: (703) 872-9326****From: Thomas M. Fisher**: Serial Number: **09/480,345**: Docket: **9D-HR-19109**: **PAPERS TRANSMITTED:**

: Amendment Transmittal (3 pgs.)

: Response to Restriction Requirement of 5/6/03

: (2 pages)

: Fax Transmittal

**Total pages including cover page: 6****If all pages are not received, please contact Mandy Robinson at (314) 621-5070, ext. 7447****CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office, Facsimile Number 1-703-872-9326 on the date shown below.

Date: June 2, 2003  
Thomas M. Fisher

Registration No. 47,564

**Applicant: Masker et al****Serial No.: 09/480,345****Filed: January 10, 2000****Art Unit: 3634****Examiner: Harris, Erica****Atty. Dkt. No.: 9D-HR-19109 (13307-59)****For: SPILLPROOF REFRIGERATOR SHELF****FAX RECEIVED**

JUN 03 2003

**GROUP 3600****Official**

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PATENT  
Attorney Docket No.: 9D-HR-19109

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Masker et al.  
Serial No.: 09/480,345  
Filed: January 10, 2000  
For: SPILLPROOF  
REFRIGERATOR SHELF

Group No.: 3634  
Examiner: Harris, Erica

Mail Stop Non Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## TRANSMITTAL

- Transmitted herewith is:  
Response to Restriction Requirement of May 6, 2003 (2 pages)  
Transmittal for Restriction Requirement (3 pages)  
Fax Cover Sheet (1 page)

## STATUS

- Applicant  
☒ claims small entity status.  
☐ is other than a small entity.


## CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING  
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Commissioner for Patents, P.O. Box 1450, Alexandria,  
VA 22313-1450

Date: \_\_\_\_\_

FACSIMILE  
☒ transmitted by facsimile to the Patent and  
Trademark Office

  
Thomas M. Fisher  
Reg No. 47,564

## EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 55.00
_____ second month	\$ 410.00	\$ 205.00
_____ third month	\$ 930.00	\$ 465.00
_____ fourth month	\$1,450.00	\$ 725.00
_____ fifth month	\$1,970.00	\$ 985.00

Fee: \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	MINUS	=		x \$9 = \$		x \$18 = \$
INDEP.	MINUS	=		x \$42 = \$		x \$84 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$140 = \$		+ \$280 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

(a) X No additional fee for Claims is required

OR

(b) \_\_\_\_\_ Total additional fee for claims required \$ \_\_\_\_\_

**FEE PAYMENT**


5. \_\_\_\_\_ Attached is a check in the sum of \$ \_\_\_\_\_  
 \_\_\_\_\_ Charge Deposit Account No. 01-2384 the sum of \$ \_\_\_\_\_.  
 A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. ✓ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ✓ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. \_\_\_\_\_ Other:

  
 Thomas M. Fisher  
 Reg. No. 47,564  
 ARMSTRONG TEASDALE LLP  
 One Metropolitan Square, Suite 2600  
 St. Louis, MO 63102  
 314/621-5070